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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
) F •	Write the name that is on your government-issued picture identification (for	Gabriel First name	First name
	example, your driver's license or passport). Bring your picture	Middle name	Middle name
	identification to your meeting with the trustee.	Horace Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1227	

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Debtor 1 Gabriel Horace Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		237 Amherst St East Orange, NJ 07018	
_1		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Essex County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 **Gabriel Horace** Case number (if known) Tell the Court About Your Bankruptcy Case 7. Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. When Case number District When District Case number When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When District Case number, if known Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. ☐ No. residence? Has your landlord obtained an eviction judgment against you? Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

bankruptcy petition.

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Debtor 1 **Gabriel Horace** Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or Where is the property? livestock that must be fed, or a building that needs

Number, Street, City, State & Zip Code

urgent repairs?

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Debtor 1 Gabriel Horace Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit

counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Gabriel Horace			Case nu	umber (if known)	
Part	6: Answer These Quest	ions for Re	porting Purposes			
16.	What kind of debts do you have?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."			
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
				business debts? Business debts are devestment or through the operation of the		
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you	u owe that are not consumer debts or bus	siness debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapt	ter 7. Go to line 18.		
Do you estimate that after any exempt after any exempt property is excluded and						
	administrative expenses		■ No			
	are paid that funds will be available for distribution to unsecured creditors?		□ Yes			
18.	you estimate that you	■ 1-49 □ 50-99		□ 1,000-5,000 □ 5001-10,000	□ 25,001-50,000 □ 50,001-100,000	
	owe?	☐ 100-19 ☐ 200-99		10,001-25,000	☐ More than100,000	
19.	How much do you estimate your assets to be worth?		0,000 1 - \$100,000 01 - \$500,000	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion	
		□ \$500,0	01 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion	
20.	How much do you estimate your liabilities to be?	□ \$100,0	0,000 11 - \$100,000 01 - \$500,000 01 - \$1 million	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion	
Part	7: Sign Below					
For	you	I have exa	mined this petition, and I o	declare under penalty of perjury that the i	nformation provided is true and correct.	
				r 7, I am aware that I may proceed, if elige e relief available under each chapter, and	gible, under Chapter 7, 11,12, or 13 of title 11, d I choose to proceed under Chapter 7.	
		document	I have obtained and read	d not pay or agree to pay someone who the notice required by 11 U.S.C. § 342(b	p).	
		I request r	elief in accordance with the	e chapter of title 11, United States Code,	, specified in this petition.	
		bankruptcy and 3571.	y case can result in fines u		ney or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,	
		Gabriel H	el Horace Horace of Debtor 1	Signature of D	Pebtor 2	
		Executed	October 16, 2019 MM / DD / YYYY	Executed on	MM / DD / YYYY	

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Debtor 1	Gabriel Horace	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Scott J	. Goldstein	Date	October 16, 2019
Signature of	Attorney for Debtor		MM / DD / YYYY
Scott J. G	oldstein 016472004		
Printed name			
Deighan L	aw LLC		
Firm name			
280 W. Ma	in Street		
Denville, N	NJ 07834		
Number, Street,	City, State & ZIP Code		
Contact phone	855-466-3920	Email address	sjg@uprightlaw.com; notices@uprightlaw.com
016472004	1 NJ		
Bar number & S	tate		

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Fill in this infor	mation to identify your	case:		
Debtor 1	Gabriel Horace			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSI	EY	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	15,563.39
	1c. Copy line 63, Total of all property on Schedule A/B	\$	15,563.39
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	16,727.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	24,789.11
	Your total liabilities	\$	41,516.11
⊃ar	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,134.43
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,343.52
² ar	t 4: Answer These Questions for Administrative and Statistical Records		
S .	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1 Gabriel Horace Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$____3,048.58

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	5,353.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	5,353.00

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		Document	Page 10 of 56		
Fill in this info	rmation to identify your	case and this filing:			
Debtor 1	Gabriel Horace				
	First Name	Middle Name	Last Name		
Debtor 2 Spouse, if filing)	First Name	Middle Name	Last Name		
, , ,			<u>Luot Hamo</u>		
Jnited States B	ankruptcy Court for the:	DISTRICT OF NEW JERSEY			
Case number			_		☐ Check if this is an
					amended filing
Official Fo	orm 106A/B				
		ortv			
	le A/B: Prop	e items. List an asset only once. If			12/15
nformation. If mo nswer every que	ore space is needed, attach estion.	te as possible. If two married peop a separate sheet to this form. On t , Land, or Other Real Estate You O	he top of any additional pag		
_					
. บo you own or	nave any legal or equitable	interest in any residence, building	ر, اand, or similar property?		
No. Go to Pa	art 2.				
☐ Yes. Where	is the property?				
Part 2: Describe	e Your Vehicles				
art 2. Describe	e rour vernoles				
□ No ■ Yes					
3.1 Make:	Nissan	Who has an interest in t	he property? Check one	Do not deduct secured cla	· · · · · · · · · · · · · · · · · · ·
Model:	Sentra	Debtor 1 only		the amount of any secure Creditors Who Have Clair	
Year:	2017	Debtor 2 only		Current value of the	Current value of the
7.7		Debtor 1 and Debtor 2	•	entire property?	portion you own?
Other info		At least one of the deb	otors and another		
HNADA	avg trade in value	☐ Check if this is comm	nunity property	\$9,750.00	\$9,750.00
		(see instructions)	raining property		
3.2 Make: Model:	Dodge Ram	Who has an interest in t ■ Debtor 1 only	he property? Check one	Do not deduct secured clause the amount of any secure Creditors Who Have Clais	d claims on Schedule D:
Year:	1997	Debtor 2 only			
		000 □ Debtor 1 and Debtor 2	only	Current value of the entire property?	Current value of the portion you own?
Other info	rmation:	At least one of the deb			
Kelley E value	Blue Book fair trade-ir	Check if this is comm	nunity property	\$1,103.00	\$1,103.00
L					
		TVs and other recreational veh onal watercraft, fishing vessels, s			
Examples. DU	ato, trancio, motoro, perst	onal watererait, nothing vessels, s	nowmobiles, motorcycle a	0000001100	
No					
☐ Yes					

Official Form 106A/B Schedule A/B: Property page 1

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Debtor 1	Gabriel Horace	Case number (if known)	
	e dollar value of the portion you own for all of your entries from Part 2, inc you have attached for Part 2. Write that number here		\$10,853.00
Part 3: De	scribe Your Personal and Household Items		
	vn or have any legal or equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>Exampl</i> □ No □	old goods and furnishings les: Major appliances, furniture, linens, china, kitchenware Describe		
	Household goods & Furnishings		\$2,750.00
□No	nics les: Televisions and radios; audio, video, stereo, and digital equipment; compute including cell phones, cameras, media players, games Describe	ers, printers, scanners; music co	ellections; electronic devices
	TV, DVD Player, Movies, Stereo, CDs, laptop, cell p	ohone	\$600.00
Exampl	bles of value les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, o other collections, memorabilia, collectibles Describe	r other art objects; stamp, coin,	or baseball card collections;
	Books & Photos		\$175.00
Example ■ No □ Yes. 10. Firearr Example ■ No □ Yes. 11. Clothe Example □ No	oles: Pistols, rifles, shotguns, ammunition, and related equipment Describe	ables, golf clubs, skis; canoes a	nd kayaks; carpentry tools;
	Wearing Apparel		\$350.00
□ No	y oles: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirl Describe	oom jewelry, watches, gems, go	old, silver
	Costume jewelry & watch		\$225.00
		-	

13. Non-farm animals

Examples: Dogs, cats, birds, horses

■ No

Case 19-30674-SLM Doc 1 Filed 10/31/19 Entered 10/31/19 14:15:39 Desc Main Page 12 of 56 Document Debtor 1 **Gabriel Horace** Case number (if known) ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$4,100.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Cash \$20.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... Chase Bank acct ending 7621 \$590.39 17.1. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders, Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No

Official Form 106A/B Schedule A/B: Property page 3

Institution name or individual:

☐ Yes.

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D	ebtor 1	Gabriel H	orace		Case number	(if known)	
23.	. Annuiti ■ No	es (A contrac	ct for a periodic payment of money to y	you, either for life or for a	number of years)		
	☐ Yes		Issuer name and description.				
24.			ation IRA, in an account in a qualifi 1), 529A(b), and 529(b)(1).	ed ABLE program, or u	nder a qualified state t	uition progran	n.
	■ No □ Yes		Institution name and description. Sep	parately file the records of	f any interests.11 U.S.C	. § 521(c):	
25.		equitable or	future interests in property (other	than anything listed in I	ine 1), and rights or po	owers exercisa	able for your benefit
	■ No □ Yes.	Give specific	information about them				
26.	_Examp		s, trademarks, trade secrets, and other domain names, websites, proceeds from				
	■ No □ Yes.	Give specific	information about them				
27.			es, and other general intangibles permits, exclusive licenses, cooperation	ve association holdings, li	quor licenses, professio	onal licenses	
	☐ Yes.	Give specific	information about them				
M	oney or p	property owe	ed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	. Tax ref	unds owed t	o you				
	■ No □ Yes. 0	Give specific	information about them, including whe	ether you already filed the	returns and the tax yea	ırs	
29.	. Family <i>Examp</i> ■ No		or lump sum alimony, spousal suppo	rt, child support, maintena	ance, divorce settlemen	t, property settl	ement
	☐ Yes. (Give specific	information				
30.	Examp	<i>les:</i> Unpaid w	neone owes you vages, disability insurance payments, unpaid loans you made to someone e		ıy, vacation pay, worke	rs' compensatio	on, Social Security
	■ No □ Yes.	Give specific	information				
31.	Ехатр	ts in insuran des: Health, d	ce policies lisability, or life insurance; health savir	ngs account (HSA); credit	, homeowner's, or rente	r's insurance	
	■ No □ Yes. I	Name the ins	urance company of each policy and lis	st its value.			
			Company name:		Beneficiary:		Surrender or refund value:
32.	If you a		perty that is due you from someone ciary of a living trust, expect proceeds		icy, or are currently entit	tled to receive p	property because
	■ No □ Yes.	Give specific	information				
33.	_Examp		d parties, whether or not you have f s, employment disputes, insurance cla		demand for payment		
	■ No □ Yes.	Describe ead	ch claim				

Official Form 106A/B Schedule A/B: Property page 4

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Debtor	1 Gabriel Horace		Case number (if known)	
_	er contingent and unliquidated claims of every nature, inclu	uding counterclaims	of the debtor and rights to set off	claims
■N	o es. Describe each claim			
	financial assets you did not already list			
■ N				
ЦΥ	es. Give specific information			
	dd the dollar value of all of your entries from Part 4, includir r Part 4. Write that number here	0 , ,	,	\$610.39
Part 5:	Describe Any Business-Related Property You Own or Have an Inte	rest In. List any real esta	ate in Part 1.	
37. Do y	ou own or have any legal or equitable interest in any business-relat	ed property?		
■ No	. Go to Part 6.			
☐ Ye	s. Go to line 38.			
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	ມ Own or Have an Interes	st In.	
			1	
	you own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
_	No. Go to Part 7.			
Ц	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
_Ex	you have other property of any kind you did not already list amples: Season tickets, country club membership	?		
■ N				
Ц 1	es. Give specific information			
54. A	dd the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
	·			<u> </u>
Part 8:	List the Totals of Each Part of this Form			
55 P :	art 1: Total real estate, line 2			\$0.00
	art 2: Total vehicles, line 5	\$10,853.00		φυ.υυ
	art 3: Total personal and household items, line 15	\$4,100.00		
	art 4: Total financial assets, line 36	\$610.39		
	art 5: Total business-related property, line 45	\$0.00		
	art 6: Total farm- and fishing-related property, line 52	\$0.00		
	art 7: Total other property not listed, line 54 +	\$0.00		
	otal personal property. Add lines 56 through 61	\$15,563.39	Copy personal property total	\$15,563.39
63. T o	otal of all property on Schedule A/B. Add line 55 + line 62			\$15,563.39

Official Form 106A/B Schedule A/B: Property page 5

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Fill in this infor	mation to identify your	case:			
Debtor 1	Gabriel Horace				
	First Name	Middle Name	Last Name	_	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name	_	
United States Bankruptcy Court for the:		DISTRICT OF NEW JERSEY		_	
Case number (if known)					Chook if this is an
(II IGIOWII)					Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the Property	/ You Clair	n as Exempt

	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)		
	■ You are claiming federal exemptions. 11 l	J.S.C. § 522(b)(2)				
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	1997 Dodge Ram 167000 miles Kelley Blue Book fair trade-in value	\$1,103.00	\$1,103.00 100% of fair market value, up to any applicable statutory limit		11 U.S.C. § 522(d)(2)	
	Line from Schedule A/B: 3.2					
	Household goods & Furnishings Line from Schedule A/B: 6.1	\$2,750.00		\$2,750.00	11 U.S.C. § 522(d)(3)	
	Line from Scriedule A/B. 0.1			100% of fair market value, up to any applicable statutory limit		
	TV, DVD Player, Movies, Stereo, CDs, laptop, cell phone	\$600.00		\$600.00	11 U.S.C. § 522(d)(3)	
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit		
	Books & Photos Line from Schedule A/B: 8.1	\$175.00		\$175.00	11 U.S.C. § 522(d)(3)	
	Line Ironi Schedule AVB. 0.1			100% of fair market value, up to any applicable statutory limit		
	Wearing Apparel Line from Schedule A/B: 11.1	\$350.00		\$350.00	11 U.S.C. § 522(d)(3)	
	Line nom Scriedule AVD. 11.1			100% of fair market value, up to any applicable statutory limit		

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De	Gabriei Horace			Case number (if known)	<u> </u>
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Costume jewelry & watch Line from Schedule A/B: 12.1	\$225.00		\$225.00	11 U.S.C. § 522(d)(4)
	Line iisiii Gonegale /v Z. 1=11			100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$20.00		\$20.00	11 U.S.C. § 522(d)(5)
	Line from Gonedate A.B. 10.1			100% of fair market value, up to any applicable statutory limit	
	Checking: Chase Bank acct ending 7621	\$590.39		\$590.39	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every	. ,		led on or after the date of adjustme	nt.)
	Yes. Did you acquire the property cover	ered by the exemption wi	ithin 1	.215 days before you filed this case	.?
	□ No	J the exemption wi		,	•
	— □ Yes				

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			Document	Page 17	of 56		
Fill in this	s informatio	n to identify you	r case:				
Debtor 1	G	abriel Horace					
		st Name	Middle Name	Last Name			
Debtor 2							
(Spouse if, fil	ing) Fire	st Name	Middle Name	Last Name			
United Sta	ates Bankrup	tcy Court for the:	DISTRICT OF NEW JERSEY				
Case num	nber						
(if known)						☐ Check	if this is an
						ameno	led filing
Official	Form 10)ED					
				_			
Sched	lule D:	Creditors	Who Have Claims	Secure	d by Property	У	12/15
	copy the Addi		f two married people are filing togeth out, number the entries, and attach it				
1. Do any c	reditors have	claims secured by	your property?				
☐ No	. Check this I	box and submit th	nis form to the court with your other	schedules. Y	ou have nothing else to	o report on this form.	
Ye	s. Fill in all of	the information b	pelow.				
Part 1:	List All Sec	ured Claims					
			nore than one secured claim, list the cre	ditor separately	Column A	Column B	Column C
for each cla	aim. If more the	an one creditor has	e a particular claim, list the other creditors in Part 2 cal order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Cre	dit Accepta	ance	Describe the property that secures t	the claim:	\$16,727.00	\$9,750.00	\$6,977.00
Credit	tor's Name		2017 Nissan Sentra 40000 m	niles			
055	05.14		HNADA avg trade in value				
	05 West 12 te 3000	i Mille Ra	As of the date you file, the claim is:	Check all that			
	ithfield, MI	48034	apply. Contingent				
-	er, Street, City, S		☐ Unliquidated				
			Disputed				
Who owes	s the debt? C	heck one.	Nature of lien. Check all that apply.				
■ Debtor	1 only		An agreement you made (such as i	mortgage or se	cured		
Debtor 2	2 only		car loan)				
Debtor 1 and Debtor 2 only		only!	☐ Statutory lien (such as tax lien, med	chanic's lien)			
_		otors and another	Judgment lien from a lawsuit				
	if this claim re unity debt	elates to a	Other (including a right to offset)				
		Opened 07/19 Last					
Date debt	was incurred	Active 8/01/19	Last 4 digits of account numl	ber 3137			

Add the dollar value of your entries in Column A on this page. Write that number here: \$16,727.00 If this is the last page of your form, add the dollar value totals from all pages. \$16,727.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		Document	Page 18	3 of 56		
Fill in thi	s information to identify yo	our case:				
Debtor 1	Gabriel Horace	1				
Dobtor 1	First Name	Middle Name	Last Name		_	
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name	Last Name		_	
	ates Bankruptcy Court for the	e: DISTRICT OF NEW JERSEY				
	,				-	
Case nur	nber				_	heck if this is an mended filing
	Form 106E/F	Who Have Unsecured	Claims			12/15
		. Use Part 1 for creditors with PRIORIT		Part 2 for creditors with	NONPRIORITY clair	
Schedule (Schedule I left. Attach name and	E: Executory Contracts and Uno D: Creditors Who Have Claims S the Continuation Page to this case number (if known).	ses that could result in a claim. Also lexpired Leases (Official Form 106G). I Secured by Property. If more space is page. If you have no information to re	Do not include needed, copy t	any creditors with parti the Part you need, fill it	ially secured claims out, number the ent	that are listed in tries in the boxes on the
Part 1:	List All of Your PRIORITY					
	y creditors have priority unsec	cured claims against you?				
	. Go to Part 2.					
☐ Ye	S.					
Part 2:	List All of Your NONPRIO	RITY Unsecured Claims				
	y creditors have nonpriority un					
_		is part. Submit this form to the court with	vour other sche	edules.		
■ Ye			,			
unsec	ured claim, list the creditor separa ne creditor holds a particular clair	d claims in the alphabetical order of the ately for each claim. For each claim listed m, list the other creditors in Part 3.If you	d, identify what t	ype of claim it is. Do not	list claims already inc	luded in Part 1. If more
						Total claim
4.1	TT Mobility	Last 4 digits of acc	count number	0565		\$373.00
N	onpriority Creditor's Name O BOX 6416	When was the deb	t incurred?	Opened 07/17		·
	Carol Stream, IL 60197		en			
	umber Street City State Zip Code /ho incurred the debt? Check or	•	file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and	Type of NONPRIOR	RITY unsecured	d claim:		
	Check if this claim is for a	ommunity				
	ebt the claim subject to offset?	☐ Obligations arising report as priority cla		ration agreement or divo	rce that you did not	
	No	☐ Debts to pension	n or profit-sharin	g plans, and other simila	r debts	
	Yes	Other. Specify	Utilities			

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Debtor	1 Gabriel Horace		Case number (if known)	
4.2	Comcast Nonpriority Creditor's Name	Last 4 digits of account number	0747	\$394.00
	123 Madison St Oak Park, IL 60302	When was the debt incurred?	Opened 07/18	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	 Obligations arising out of a sepa report as priority claims 	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Utilities		
	Cornerstone/American Education			
4.3	Services	Last 4 digits of account number	0001	\$3,353.00
	Nonpriority Creditor's Name	-	One and 40/47 Least Active	
	Attn: Bankruptcy Po Box 2461	When was the debt incurred?	Opened 12/17 Last Active 7/20/19	
	Harrisburg, PA 17105		1/20/10	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	Student loans	a ciaiii.	
	☐ Check if this claim is for a community debt			
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing		
	□Yes	Other. Specify		
		Educationa		
	Cornerstone/American Education			
4.4	Services Nonpriority Creditor's Name	Last 4 digits of account number	0002	\$2,000.00
	Attn: Bankruptcy		Opened 12/17 Last Active	
	Po Box 2461	When was the debt incurred?	7/20/19	
	Harrisburg, PA 17105 Number Street City State Zip Code	As of the data you file the claim	S. Charle all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim i	s. Спеск ан тат арргу	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□ Yes	Other. Specify		

Educational

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Debtor	1 Gabriel Horace		Case number (if known)	
4.5	Dmytro Lebets	Last 4 digits of account number	2219	Unknown
	Nonpriority Creditor's Name c/o Law Office of Yuriy Prakhin PC Nicholas M Serlin, Esq 1883 86th Street, 2nd Floor Brooklyn, NY 11214	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Lawsuit Se	ttlement	
4.6	E-Z Pass NY Service Center	Last 4 digits of account number	5532	\$434.00
	Nonpriority Creditor's Name Violation Processing Unit PO Box 15186	When was the debt incurred?		
	Albany, NY 12212-5186 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	■ Other. Specify Driving Vio	lation	
4.7	Liberal Finance Servic	Last 4 digits of account number	3961	\$159.00
	Nonpriority Creditor's Name 1160 Parsippany BI Parsippany, NJ 07054	When was the debt incurred?	Opened 07/16 Last Active 3/28/18	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured		
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	- ·	
	Yes	Other. Specify Deficiency	on Car Loan	

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Case number (if known)

Debtor	1 Gabriel Horace	Case number (if known)	
4.8	Liberal Finance Services	Last 4 digits of account number 2617	Unknown
	Nonpriority Creditor's Name 1160 Parsippany Blvd #101	When was the debt incurred?	
	Parsippany, NJ 07054 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Personal Loan	
4.9	Liberty Mutual Insurance Co	Last 4 digits of account number 0202	\$3,150.25
	Nonpriority Creditor's Name 200 Cottontail Lane Ste A101W	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Ins Co	
4.1		0000	A4 004 00
0	Monoc Ambulance Service Corp Nonpriority Creditor's Name	Last 4 digits of account number 0686	\$1,064.00
	260 Church Street Matawan, NJ 07747	When was the debt incurred? Opened 01/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Debt	

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Deptoi	Gabrier Horace	Case Humber (II known)	
4.1 1	NBIMC Dept of Radiology	Last 4 digits of account number 8630	\$11.20
	Nonpriority Creditor's Name PO Box 8000 Dept 571 Buffalo, NY 44367,0004	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Debt	
4.1	Newark Beth Israel Medical Center Nonpriority Creditor's Name	Last 4 digits of account number 0356	\$644.56
	201 Lyons Ave Newark, NJ 07102	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Debt	
4.1	NJ E-Z Pass Nonpriority Creditor's Name	Last 4 digits of account number 4968	\$83.35
	375 McCarter Highway (Route 21) Newark, NJ 07114	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify Driving Violation	

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Case number (if known)

Jept	or 1 Gabriel Horace	Case number (if known)	
1.1	NJ E-Z Pass	Last 4 digits of account number	\$206.80
+	Nonpriority Creditor's Name 375 McCarter Highway (Route 21) Newark, NJ 07114	When was the debt incurred?	· · · · · · · · · · · · · · · · · · ·
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Driving Violation	
4.1 5	NJ Manufacturers Ins Co	Last 4 digits of account number 7857	\$10,040.97
	Nonpriority Creditor's Name 301 Sullivan Way Trenton, NJ 08628	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Ins Co	
1.1	Prime Rate Finance	Last 4 digits of account number 1079	\$757.98
<u> </u>	Nonpriority Creditor's Name 2141 Enterprise Dr	When was the debt incurred?	
	Florence, SC 29501		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify Ins Co	

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Case number (if known)

Jept	or 1 Gabriel Horace	Case number (if known)	
1.1 7	State of NJ	Last 4 digits of account number 9647	\$750.00
	Nonpriority Creditor's Name Surcharge Violation System PO Box 4850	When was the debt incurred?	
	Trenton, NJ 08650-4850 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Driving Violation	
4.1 3	State of NJ Nonpriority Creditor's Name	Last 4 digits of account number 6655	\$780.00
	Surcharge Violation System PO Box 4850	When was the debt incurred?	
	Trenton, NJ 08650-4850 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset? —	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Driving Violation	
1.1)	State of NJ	Last 4 digits of account number 8656	\$254.00
	Nonpriority Creditor's Name Surcharge Violation System PO Box 4850	When was the debt incurred?	
	Trenton, NJ 08650-4850 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify Driving Violation	

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Debtor	1 Gabriel Horace		Case number (if known)	
4.2	T-Mobile	Last 4 digits of account number	8910	\$333.00
0	Nonpriority Creditor's Name			· ·
	Bankruptcy Department P.O. Box 53410	When was the debt incurred?	Opened 10/18	
	Bellevue, WA 98015			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	_			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separe report as priority claims	ration agreement or divorce that you did not	
	•	Debts to pension or profit-sharin	a plane, and other similar debte	
	No	·	g plans, and other similar debts	
	Yes	Other. Specify Utilities		
Part 3:	List Others to Be Notified About a D	Debt That You Already Listed		
is tryi have ı	nis page only if you have others to be notifie ng to collect from you for a debt you owe to more than one creditor for any of the debts t ed for any debts in Parts 1 or 2, do not fill ou	someone else, list the original creditor in hat you listed in Parts 1 or 2, list the addi	Parts 1 or 2, then list the collection agency	here. Similarly, if you
Name a	nd Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
	Collections	Line 4.11 of (Check one):	Part 1: Creditors with Priority Unsecured Clai	ms
	ox 2137	•	Part 2: Creditors with Nonpriority Unsecured	Claims
Ioms	River, NJ 08754-2137	Last 4 digits of account number		
	nd Address	On which entry in Part 1 or Part 2 did you	•	
200 W	2nd St		Part 1: Creditors with Priority Unsecured Clai	
	on Salem, NC 27101	-	Part 2: Creditors with Nonpriority Unsecured	Claims
	,	Last 4 digits of account number		
Name a	nd Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
	nercial Acceptance Company		Part 1: Creditors with Priority Unsecured Clai	ms
	Gettysburg Road		Part 2: Creditors with Nonpriority Unsecured	Claims
Suite	-		• •	
Camp	Hill, PA 17011	Last 4 digits of account number		
	nd Address ence Resource Management	On which entry in Part 1 or Part 2 did you Line 4.1 of (<i>Check one</i>):	list the original creditor? I Part 1: Creditors with Priority Unsecured Clai	
	Dallas Parkway	`	·	
Suite:	204	_	Part 2: Creditors with Nonpriority Unsecured	Claims
Dallas	s, TX 75248	Lock 4 divite of account assumb as		
		Last 4 digits of account number		
	nd Address	On which entry in Part 1 or Part 2 did you		
	stem Inc		Part 1: Creditors with Priority Unsecured Clai	
	Bankruptcy ox 64378	•	Part 2: Creditors with Nonpriority Unsecured	Claims
	ul, MN 55164			
		Last 4 digits of account number		
Name a	nd Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
Profes	ssional Account Management		Part 1: Creditors with Priority Unsecured Clai	ms
LLC	4500		Part 2: Creditors with Nonpriority Unsecured	Claims
-	ox 1520			
wiiiwa	ukee, WI 53201-1520	Last 4 digits of account number		
	nd Address olph Walzer & Associates LLC	On which entry in Part 1 or Part 2 did you Line 4.8 of (<i>Check one</i>):	list the original creditor? I Part 1: Creditors with Priority Unsecured Clai	me
			- 1 art 1. Ordanors which Hority Oriseculed Olai	

Official Form 106 E/F

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Debtor 1 Gabriel Horace		Case number (if known)				
PO Box 1234 Jackson, NJ 08527	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured Claims				
Name and Address Retrieval Masters Creditors Bureau	On which entry in Part 1 or Part 2 d	· · ·				
4 Westchester Plaza, Suite 110	Line 4.13 of (Check one):	Part 1: Creditors with Priority Unsecured Claims				
Elmsford, NY 10523		■ Part 2: Creditors with Nonpriority Unsecured Claims				
	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?					
Southwest Credit Systems	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
4120 International Parkway Suite 1100		Part 2: Creditors with Nonpriority Unsecured Claims				
Carrollton, TX 75007	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?				
Wilbur & Associates, P.C.	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
210 Landmark Dr. Normal, IL 61761-2194		Part 2: Creditors with Nonpriority Unsecured Claims				
	Last 4 digits of account number	5708				

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
	6f.	Student loans	6f.	\$ Total Claim 5,353.00
Total claims from Part 2	6a.	Obligations origing out of a congration personnent or diverse that		
IIOIII Part 2	og.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 19,436.11
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 24,789.11

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Fill in this infor	mation to identify your	case:		
Debtor 1	Gabriel Horace			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JEF	RSEY	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4	,				
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5	-				
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_

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		Docume	nı Page 28 C	סכ וע	
Fill in this	information to identify your	case:			
Debtor 1	Cabriel Harasa				
Depioi i	Gabriel Horace First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	DISTRICT OF NEW JE	RSEY		
Case numb (if known)	ber				☐ Check if this is an
(amended filing
			,		3
Official	l Form 106H				
		abtana			
Schea	lule H: Your Cod	eptors			12/15
No Yes 2. With Arizon No. Yes 3. In Colin line	hin the last 8 years, have you as, California, Idaho, Louisiana Go to line 3. s. Did your spouse, former spouts umn 1, list all of your codebte 2 again as a codebtor only is	u lived in a community progression, Nevada, New Mexico, Pu use, or legal equivalent live tors. Do not include your	roperty state or territonerto Rico, Texas, Washe with you at the time? spouse as a codebtoner or cosigner. Make	ry? (Community propert iington, and Wisconsin.) r if your spouse is filin sure you have listed tl	g with you. List the person shown he creditor on Schedule D (Official
	106D), Schedule E/F (Officia olumn 2.	I Form 106E/F), or Sched	ule G (Official Form 10	06G). Use Schedule D,	Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor	ID O - d -			editor to whom you owe the debt
ľ	Name, Number, Street, City, State and Z	IP COde		Check all schedule	es tnat apply:
3.1				☐ Schedule D, lin	
	Name			Schedule E/F, I	
				☐ Schedule G, lin	
_				Scriedule G, IIII	le
	Number Street	_		_	
'	City	State	ZIP Code		
3.2				☐ Schedule D, lin	
	Name			Schedule E/F, I	
				☐ Schedule E/F, I	
_				Scriedule G, IIII	
	Number Street	Chata	710.0-4-		
	City	State	ZIP Code		

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Eill	in this information t	to identify your o	380.									
	btor 1	Gabriel Hora										
	btor 2 buse, if filing)						_					
Uni	ited States Bankrup	otcy Court for the	: DISTRICT OF NEW J	ERSEY								
(If kr	se number	1061		-				□ A □ A 1:	3 income	ed filing ent show as of the	ving postpetition following date:	
	chedule I:		omo					M	IM / DD/ Y	YYY		12/15
sup spo atta	plying correct info use. If you are sep ch a separate she	ormation. If you parated and you	sible. If two married peo are married and not filir ir spouse is not filing wi On the top of any additi	ng jointly, a ith you, do	and your spo not include	use i	s livi natic	ng with n about	you, incl your spo	ude info ouse. If 1	ormation about more space is	your needed,
1.	Fill in your empl information.	loyment		Debtor 1					Debtor 2	or non	-filing spouse	
	attach a separate	If you have more than one job, attach a separate page with information about additional employers.	Employment status		■ Employed				☐ Employed ☐ Not employed			
			Occupation	☐ Not employed Appliance Electrician				□ Not e	проува			
	Include part-time, self-employed wo		Employer's name	Squan Construction Services				es				
	Occupation may or homemaker, if		Employer's address	329 Harold Ave Englewood, NJ 07631								
			How long employed the	here?	9 months				_			
Pai	rt 2: Give De	etails About Mor	nthly Income									
	imate monthly incouse unless you are		ate you file this form. If y	you have no	othing to repo	rt for a	any li	ne, write	\$0 in the	space. I	Include your no	n-filing
	ou or your non-filing e space, attach a s		ore than one employer, co this form.	ombine the i	information fo	r all e	mplo	yers for	that perso	n on the	e lines below. If	you need
								For Del	otor 1		ebtor 2 or filing spouse	
2.			ry, and commissions (becalculate what the month)			2.	\$	3	,127.94	\$	N/A	
3.	Estimate and lis	st monthly overt	ime pay.			3.	+\$		174.69	+\$_	N/A	
4.	Calculate gross	Income. Add lir	ne 2 + line 3.			4.	\$	3,30	02.63	\$_	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Gabriel Horace	-		Case	e number (if kn	own)				
					Fo	r Debtor 1			or Debtor on-filing s		
	Cop	y line 4 here	4.		\$	3,302	2.63	\$	9	N/A	<u> </u>
5.	List	all payroll deductions:									
٠.	5a.	Tax, Medicare, and Social Security deductions	5	а	\$	620	37	\$		N/A	
	5b.	Mandatory contributions for retirement plans	51		\$-		0.00	\$-		N/A	
	5c.	Voluntary contributions for retirement plans	50		\$		0.00	\$-		N/A	_
	5d.	Required repayments of retirement fund loans		d.	\$.00	\$		N/A	_
	5e.	Insurance	56		\$.34	\$		N/A	_
	5f.	Domestic support obligations	5f		\$		0.00	\$		N/A	_
	5g.	Union dues	5		\$		3.49	\$	-	N/A	_
	5h.	Other deductions. Specify:		h.+	\$.00	+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$	1,168		\$		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,134		\$		N/A	_
8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88	a.	\$		0.00	\$		N/A	_
	8b.	Interest and dividends	81		\$-		0.00	\$-		N/A	_
	8c. 8d. 8e. 8f.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance	86	d.	\$_ \$_ \$_	0	0.00 0.00 0.00	\$_ \$_ \$_		N/A N/A N/A	_
	0	that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$_		0.00	\$_		N/A	_
	8g.	Pension or retirement income	80	_	\$_		.00	\$_		N/A	_
	8h.	Other monthly income. Specify:	_ 81	h.+	\$_	0	.00	+ \$_		N/A	<u></u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	0	.00	\$_		N/	A
10	Calc	culate monthly income. Add line 7 + line 9.	10.	\$		2,134.43	. \$		N/A	= \$	2,134.43
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		_		2,104.40	Ľ				2,10-1-10
11.	Inclu othe Do r	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	dep			, ,		•	Schedule	e <i>J</i> . +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain ies							e. 12.	\$	2,134.43
13.	Do	you expect an increase or decrease within the year after you file this form?	?							Combi month	ned ly income
		No. Ves Explain:									

Official Form 106l Schedule I: Your Income page 2

Filli	n this informa	tion to identify yo	our case:			1		
Deb	tor 1	Gabriel Hora	ıce			Chec	ck if this is:	
Deb	tor 2					_	An amended filing	wing postpetition chapter
	ouse, if filing)						13 expenses as of	
Unite	ed States Bankr	ruptcy Court for the	: DISTRI	CT OF NEW JERSEY			MM / DD / YYYY	
Case	e numbe r							
(If kr	nown)							
Of	ficial Fo	rm 106J				-		
		J: Your	Exper	ises				12/15
Be a	as complete a	and accurate as	possible.	If two married people ch another sheet to thi				
Part	1: Descr	ibe Your House	hold					
١.	■ No. Go to							
			in a separ	ate household?				
	□N	_						
	ЦΥ	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expense</i>	es for Separate House	ehold of Deb	tor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state dependents							□ No □ Yes
	dependents	names.						☐ Yes
							_	Yes
								□ No □ Yes
								□ res
								☐ Yes
3.	expenses of	enses include f people other t d your depende	han $_{m \Box}$	No Yes				
Par	2: Estim	ate Your Ongoi	na Monthi	v Fxnenses				
Esti	imate your ex	penses as of y	our bankrı	uptcy filing date unless				apter 13 case to report of the form and fill in the
				government assistance				
	value of sucl icial Form 10		d have inc	luded it on <i>Schedule I:</i>	Your Income		Your exp	enses
4.		or home owners and any rent for th		ses for your residence r lot.	Include first mortgag	e 4. §	8	400.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$	5	0.00
	4b. Prope	rty, homeowner's				4b. \$	S	0.00
				ipkeep expenses		4c. \$		0.00
5.		owner's associat nortgage paym		dominium dues o ur residence, such as h	ome equity loans	4d. \$ 5. \$		0.00 0.00

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Deb	otor 1	Gabriel H	Horace	Case num	nber (if known)	
6.	Utiliti	ies:				
0.	6a.		heat, natural gas	6a.	\$	0.00
	6b.		wer, garbage collection	6b.	\$	0.00
	6c.		e, cell phone, Internet, satellite, and cable services	6c.	\$	60.00
	6d.	Other. Spe		6d.	· -	0.00
7.	Food	•	ekeeping supplies	7.	\$	350.00
8.			children's education costs	8.	\$	0.00
9.	Cloth	ning, laund	ry, and dry cleaning	9.	\$	100.00
10.			products and services	10.	\$	45.00
			ntal expenses	11.		50.00
12.	Trans	sportation.	Include gas, maintenance, bus or train fare.			
			ar payments.	12.	\$	160.00
13.	Ente	rtainment,	clubs, recreation, newspapers, magazines, and book	s 13.	\$	0.00
14.	Char	itable cont	ributions and religious donations	14.	\$	0.00
15.	Insur					
			nsurance deducted from your pay or included in lines 4 or			
		Life insura		15a.	·	0.00
	15b.	Health ins	urance	15b.	·	0.00
	15c.	Vehicle ins	surance	15c.	\$	408.33
	15d.	Other insu	ırance. Specify:	15d.	\$	0.00
16.			clude taxes deducted from your pay or included in lines			
	Spec	,		16.	\$	0.00
17.			ease payments:	4-	•	4=0.40
			ents for Vehicle 1	17a.	·	470.19
			ents for Vehicle 2	17b.	·	0.00
		Other. Spe	-		·	0.00
		Other. Spe		17d.	\$	0.00
18.			of alimony, maintenance, and support that you did n		\$	300.00
10			your pay on line 5, <i>Schedule I, Your Income</i> (Official s you make to support others who do not live with yo	01111 1001 <i>j</i> .	\$	0.00
15.	Spec		s you make to support others who do not live with yo	u. 19.	Ψ	0.00
20		·	erty expenses not included in lines 4 or 5 of this forn			
_0.			s on other property	20a.		0.00
		Real estat		20b.		0.00
			homeowner's, or renter's insurance	20c.	·	0.00
			nce, repair, and upkeep expenses	20d.		0.00
			er's association or condominium dues	20e.	\$	0.00
21.		r: Specify:			+\$	0.00
	•	opcony.			, ,	0.00
22.			monthly expenses			
			through 21.		\$	2,343.52
	22b. (Copy line 22	2 (monthly expenses for Debtor 2), if any, from Official Fo	orm 106J-2	\$	
	22c. /	Add line 22a	a and 22b. The result is your monthly expenses.		\$	2,343.52
00	0-1					
23.		•	monthly net income. 12 (your combined monthly income) from Schedule I.	23a.	¢	2.424.42
		. ,	monthly expenses from line 22c above.	23a. 23b.		2,134.43
	230.	Copy your	monthly expenses from line 22c above.	230.	- Ф	2,343.52
	23c	Subtract v	our monthly expenses from your monthly income.			
	250.		is your <i>monthly net income</i> .	23c.	\$	-209.09
		100011	is year monary normoonion			
24.			an increase or decrease in your expenses within the			
			ou expect to finish paying for your car loan within the year or do y	ou expect your mortgage	payment to inc	rease or decrease because of a
			terms of your mortgage?			
	■ No					
	☐ Ye	es.	Explain here:			

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Fill in this infor	rmation to identify your	case:				
Debtor 1	Gabriel Horace					
	First Name	Middle Name	Las	st Name	_	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Lac	st Name		
(Spouse II, IIIIIIg)	i iist ivaille	Wildule Name	Las	n maine		
United States B	ankruptcy Court for the:	DISTRICT OF NEW JERSEY				
Case number						
(if known)						☐ Check if this is an
						amended filing
0(":15	4000					
Official For	m 106Dec					
Declara ¹	tion About a	ın Individual De	bt	or's Sched	lules	12/15
obtaining mone years, or both.		n connection with a bankruptcy				ement, concealing property, or 00, or imprisonment for up to 20
Did you pa	ay or agree to pay some	one who is NOT an attorney to	help	you fill out bankrup	tcy forms?	
■ No						
☐ Yes.	Name of person					kruptcy Petition Preparer's Notice,
					Declaration	n, and Signature (Official Form 119)
that they a	re true and correct.	that I have read the summary a		chedules filed with t	this declarati	on and
	briel Horace el Horace		Х	Signature of Debtor	2	
	ure of Debtor 1			Signature of Debtor .	-	
Date	October 16, 2019			Date		

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Fill	in this inforn	nation to identify your	case:							
Del	otor 1	Gabriel Horace								
D . I	0	First Name	Middle Name	Last Name						
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name						
Uni	ted States Bar	nkruptcy Court for the:	DISTRICT OF NEW JERS	SEY						
Case number					_	theck if this is an mended filing				
Sta Be a	as complete a rmation. If m	of Financial And accurate as possiore space is needed,	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup additional pages, write you					
		i). Answer every ques	stion. rrital Status and Where You	Lived Before						
1.		current marital statu		LIVEU DEIVIE						
••	☐ Married ■ Not mar		.							
2.			lived anywhere other than	where you live now?						
۷.	_	g the last 3 years, have you lived anywhere other than where you live now?								
	■ No □ Yes. Lis	No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.								
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there				
3. state					ity property state or territory co, Texas, Washington and W					
	■ No □ Yes. Ma	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Of	ificial Form 106H).						
Pai	t 2 Explai	n the Sources of You	r Income							
4.	Fill in the tota	I amount of income you	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?				
	□ No ■ Yes. Fill	in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
bonuse:			■ Wages, commissions, bonuses, tips	\$25,963.80	☐ Wages, commissions, bonuses, tips					
			☐ Operating a business		☐ Operating a business					

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Debtor 1 Gabriel Horace Case number (if known)

Debtor 1 Gabriel Horace						Case number (if known)						
					Debtor 1			Debtor 2				
					Sources of income Check all that apply.	(before	s income re deductions and sions)	Sources of income Check all that apply.		Gross income (before deductions and exclusions)		
			dar year: December (31, 2018)	■ Wages, commissions, bonuses, tips		\$22,576.00	☐ Wages, combonuses, tips	nmissions,			
					☐ Operating a business			☐ Operating a	business			
			lar year bef December 3		■ Wages, commissions, bonuses, tips		\$27,530.00	☐ Wages, combonuses, tips	nmissions,			
					☐ Operating a business			☐ Operating a	business			
	winnir	ngs. Ìí ach s No	f you are fili	ng a joint cas	pensions; rental income; intere and you have income that the me from each source separa	you recei	ved together, list it o	only once under Do	ebtor 1.	a gameing and loadly		
					Debtor 1			Debtor 2				
			Sources of income Describe below.	each	s income from source re deductions and sions)	Sources of income Describe below.		Gross income (before deductions and exclusions)				
Par	t 3:	List	Certain Pa	yments You	Made Before You Filed for	Bankrup	otcy					
6.	_	No. Neither Debtor 1's or Debtor 2's debts primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by a individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to a										
				attorney for	this bankruptcy case.							
	_		Name and									

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Del	ebtor 1 Gabriel Horace		Cas	e number (if known)							
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.										
	NoYes. List all payments to an insider.										
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment					
8.	insider?	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an									
	■ No□ Yes. List all payments to an insider										
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name					
Par	rt 4: Identify Legal Actions, Reposses	sions, and Foreclosures									
9.	Within 1 year before you filed for bankr List all such matters, including personal in modifications, and contract disputes. No Yes. Fill in the details.										
	Case title Case number	Nature of the case	Court or agency		Status of the case						
	Dmytro Lebets v. Gabriel Horace ESX-L-000122-19	Civil	Superior Court of New Jersey Law Division: Essex County 470 MLK Blvd Newark, NJ 07102		■ Pending □ On appeal □ Concluded						
	Prayulpan Porwal & Nikita Porwal v. Gabriel Horace, et al ESX-L-000038-19	Civil	Superior Court of New Jersey Law Division: Essex County 470 MLK Blvd Newark, NJ 07102		■ Pending □ On appeal □ Concluded						
10.	Within 1 year before you filed for bankr Check all that apply and fill in the details b		erty repossessed, f	oreclosed, garnis	shed, attached	I, seized, or levied?					
	No. Go to line 11.Yes. Fill in the information below.										
	Creditor Name and Address	Describe the Property Explain what happene	d	Date		Value of the property					
11.	Within 90 days before you filed for ban accounts or refuse to make a payment No	kruptcy, did any creditor, inc		nancial institutior	n, set off any a	mounts from your					
	Yes. Fill in the details.	Describe the setter the	a anaditan ta al-	Dete	action was	A					
	Creditor Name and Address	Describe the action the	e creditor took	or took Dat take		Amount					

Case 19-30674-SLM Doc 1 Filed 10/31/19 Entered 10/31/19 14:15:39 Desc Main Page 37 of 56 Document Debtor 1 Gabriel Horace Case number (if known) 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of transferred or transfer was **Address** payment **Email or website address** made Person Who Made the Payment, if Not You

Deighan Law LLC

79 W. Monroe St.

Chicago, IL 60603

sig@uprightlaw.com

notices@uprightlaw.com,

Fifth Floor

Attorney Fees - \$1650

Filing Fee - \$335

\$1,985.00

Payment

made in

between

installments

03/25/2019 -

08/02/2019

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Debtor 1 Gabriel Horace Case number (if known)

17.	 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. 				
	Person Who Was Paid Address	Description and variansferred	value of any property	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have alreated No	business or financial affa nade as security (such as	airs? the granting of a secui		
	Person Who Received Transfer Address Person's relationship to you	Description and property transfer	red p	Describe any property or payments received or debts paid in exchange	Date transfer was made
19.	Within 10 years before you filed for bankru beneficiary? (These are often called asset-p. No ☐ Yes. Fill in the details.		ny property to a self-	settled trust or similar device	of which you are a
	Name of trust	Description and	value of the property	transferred	Date Transfer was made
Par	8: List of Certain Financial Accounts, In	nstruments, Safe Deposi	t Boxes, and Storage	Units	
 Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in y sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shat houses, pension funds, cooperatives, associations, and other financial institutions. No 					
	Yes. Fill in the details. Name of Financial Institution and	Last 4 digits of	Type of account or	Date account was	Last balance
	Address (Number, Street, City, State and ZIP Code)	account number	instrument	closed, sold, moved, or transferred	before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables? No Yes. Fill in the details.	year before you filed for	r bankruptcy, any sat	fe deposit box or other depo	sitory for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		cribe the contents	Do you still have it?
22.	Have you stored property in a storage unit	,	r home within 1 year	before you filed for bankrupt	cy?
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, S State and ZIP Code)		cribe the contents	Do you still have it?

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Debtor 1 Gabriel Horace Case number (if known)

Par	t 9: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that some for someone.	one else owns? Include any prope	rty you borrowed from, are storing fo	r, or hold in trust
	■ No			
	Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	t 10: Give Details About Environmental Inform	ation		
For	the purpose of Part 10, the following definitions	apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, groun	- ·	
_	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	l sites.		
	Hazardous material means anything an enviror hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic	substance,
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n they occurred.	
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	e under or in violation of an environm	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	No No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admini	strative proceeding under any env	ironmental law? Include settlements	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	t11: Give Details About Your Business or Cor	nnections to Any Business		
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of the following connections to an	y business?
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity	, either full-time or part-time	
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	nip (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing execu	tive of a corporation		
	An owner of at least 5% of the voting of	r aquity sacurities of a corneration		

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Debtor 1 Gabriel Horace Case number (if known)

Der	noi i Gabriei noi ace	Ca	ise number (ii known)				
							
	No. None of the above applies. Go to I	Part 12.					
	Yes. Check all that apply above and fill in the details below for each business.						
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.				
			Dates business existed				
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	tcy, did you give a financial statement to a	nyone about your business? Include all financial				
	■ No □ Yes. Fill in the details below.						
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued					
Par	t 12: Sign Below						
are t		false statement, concealing property, or o	declare under penalty of perjury that the answers btaining money or property by fraud in connection ars, or both.				
/s/	Gabriel Horace						
	briel Horace nature of Debtor 1	Signature of Debtor 2					
Dat	e October 16, 2019	Date					
Did : ■ N □ Y		ent of Financial Affairs for Individuals Filin	g for Bankruptcy (Official Form 107)?				
Did :	you pay or agree to pay someone who is no	t an attorney to help you fill out bankruptc	y forms?				

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	nation to identify your	case:				
Debtor 1	Gabriel Horace					
	First Name	Middle Name		Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name		Last Name		
United States Bar	nkruptcy Court for the:	DISTRICT OF NE	W JERSEY			
	., .,					
Case number						☐ Check if this is an
						amended filing
Official For	rm 108					
Statemen	nt of Intentio	n for Indiv	iduals	Filing Under C	Chapter 7	12/15
					-	
_	vidual filing under cha claims secured by yo		l out this for	m if:		
_	ed personal property a		ot expired.			
You must file this	s form with the court w ver is earlier, unless th	ithin 30 days after	you file your	bankruptcy petition or by use. You must also send co	the date set for opies to the cre	the meeting of creditors, ditors and lessors you list
	ople are filing together d date the form.	in a joint case, bo	th are equall	y responsible for supplying	g correct inform	ation. Both debtors must
	and accurate as possib our name and case nur		needed, atta	ach a separate sheet to this	s form. On the to	pp of any additional pages,
Part 1: List Yo	our Creditors Who Have	e Secured Claims				
For any creditorinformation be	-	art 1 of Schedule D	: Creditors V	Who Have Claims Secured b	y Property (Off	cial Form 106D), fill in the
	editor and the property t	hat is collateral	What do y secures a	ou intend to do with the prodebt?	operty that	Did you claim the property as exempt on Schedule C?
Creditor's C	redit Acceptance		☐ Surrence	ler the property.		■ No
name:			_	the property and redeem it.		Пу
Description of	2017 Nissan Sentr			the property and enter into a mation Agreement.		☐ Yes
property	HNADA avg trade	in value		he property and [explain]:		
securing debt:						
	our Unexpired Persona					
in the information	n below. Do not list rea	I estate leases. Un	expired leas		n effect; the leas	ases (Official Form 106G), fill se period has not yet ended.
Describe your un	nexpired personal pro	perty leases			Will	the lease be assumed?
					_	
Lessor's name: Description of lea	sed					No
Property:						Yes
Lessor's name:						No
Description of lea	sed					
Property:						Yes
Lessor's name:					П	No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Deb	otor 1	Gabriel Horace	Case number (if kn	own)
	criptior perty:	n of leased		☐ Yes
1 10	porty.			□ res
	sor's na			□ No
	criptior perty:	n of leased		
FIU	perty.			☐ Yes
	sor's na			□ No
	criptior perty:	n of leased		
1 10	perty.			☐ Yes
	sor's na			□ No
	criptior perty:	n of leased		
1 10	perty.			☐ Yes
	sor's na			□ No
		n of leased		
FIU	perty:			☐ Yes
Par	t 3:	Sign Below		
		alty of perjury, I declare that I have indicat at is subject to an unexpired lease.	ted my intention about any property of my estate tha	t secures a debt and any personal
Χ	/s/ G	abriel Horace	X	
	Gabr	iel Horace	Signature of Debtor 2	
	Signa	ture of Debtor 1		
	Date	October 16, 2019	Date	

Fill in this in	formation to identify your case:		Ch	eck one	box only as d	irected in this form and	in Form
Debtor 1	Gabriel Horace		123	2A-1Su	pp:		
Debtor 2				■ 4 TI	:	and the second	
(Spouse, if filin	g)			_	·	umption of abuse	
United Stat	es Bankruptcy Court for the: District of New Jer	sey				o determine if a presur nade under <i>Chapter 7 l</i>	
Case numb	er					icial Form 122A-2).	vicario rest
(if known)				□ 3. Tł	ne Means Test	does not apply now be	ecause of
				q	ualified military	service but it could ap	ply later.
				☐ Che	eck if this is a	n amended filing	
<u>Official</u>	Form 122A - 1						
Chapte	er 7 Statement of Your Cur	rent Mor	nthly Inc	ome)		12/1
attach a sepa case number	ete and accurate as possible. If two married people a trate sheet to this form. Include the line number to w (if known). If you believe that you are exempted fro litary service, complete and file Statement of Exemp Calculate Your Current Monthly Income	hich the addition m a presumption	nal information a of abuse becau	applies. Ise you (On the top of aid on the top of aid on the top of the t	ny additional pages, writ narily consumer debts o	te your name and or because of
1. What	is your marital and filing status? Check one or	nly.					
■ No	t married. Fill out Column A, lines 2-11.						
□ Ма	rried and your spouse is filing with you. Fill ou	ut both Columns	A and B, lines	2-11.			
□Ма	rried and your spouse is NOT filing with you.	You and your s	spouse are:				
	iving in the same household and are not lega	ılly separated. F	Fill out both Co	lumns A	A and B, lines 2	2-11.	
	Living separately or are legally separated. Fill openalty of perjury that you and your spouse are living apart for reasons that do not include evadir	egally separated	d under nonban	kruptcy	law that applie	es or that you and your	
101(10A). the 6 mon	average monthly income that you received from all For example, if you are filing on September 15, the 6-m ths, add the income for all 6 months and divide the total wn the same rental property, put the income from that p	onth period would by 6. Fill in the res	be March 1 throi sult. Do not includ	ugh Augi de any in	ust 31. If the amo	ount of your monthly incomore than once. For examp	ne varied during ble, if both
				Colum Debto		Column B Debtor 2 or non-filing spouse	
	gross wages, salary, tips, bonuses, overtime, deductions).	and commission	ons (before all	\$	3,048.58	\$	
3. Alimo	ny and maintenance payments. Do not include n B is filled in.	payments from	a spouse if	\$	0.00	\$	
of you from a and ro	nounts from any source which are regularly part or your dependents, including child support in unmarried partner, members of your household ommates. Include regular contributions from a span. Do not include payments you listed on line 3.	. Include regular d, your depender	contributions nts, parents,	\$	0.00	\$	
	come from operating a business, profession,						
			otor 1				
	receipts (before all deductions)	\$ 0.00					
	ary and necessary operating expenses	-\$ 0.00	Copy here ->	¢	0.00	\$	
	onthly income from a business, profession, or far	m \$	Copy nere ->	Ψ	0.00	Φ	
o. Net in	come from rental and other real property	Deb	otor 1				
Gross	receipts (before all deductions)	\$ 0.00					
	ary and necessary operating expenses	-\$ 0.00					
	onthly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	
	st, dividends, and royalties			\$	0.00	\$	

Official Form 122A-1

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Debtor 1	Gabriel Horace			Case numbe	r (<i>if known</i>)			
				Column A Debtor 1		Column E Debtor 2 non-filing	or	
8. U n	employment compensation			\$	0.00	\$		
Do	not enter the amount if you contend that the amour Social Security Act. Instead, list it here:	nt received was a bene	fit under			·		
I	For you S	0 .	.00					
I	For your spouse S	.						
bei	nsion or retirement income. Do not include any an nefit under the Social Security Act.			\$	0.00	\$		
Do red doi	not include any benefits received under the Social eived as a victim of a war crime, a crime against humestic terrorism. If necessary, list other sources on al below.	Security Act or paymer imanity, or internationa	nts I or	•				
	·			\$	0.00	\$		
				\$	0.00	\$		
	Total amounts from separate pages, if any.		+	\$	0.00	\$		
	Iculate your total current monthly income. Add lich column. Then add the total for Column A to the to		\$	3,048.58	+ \$_		= \$	3,048.58
							Total	current monthly
							incom	
Part 2:	Determine Whether the Means Test Applies	to You						
12. Ca	Iculate your current monthly income for the yea	r. Follow these steps:						
	a. Copy your total current monthly income from line			Con	v line 11	nere=>	\$	3,048.58
120	a. Copy your total current monthly income nor line	11		ООР	y iiiic i i	1010->	ΙΨ	3,040.30
	Multiply by 12 (the number of months in a year)						X	12
4.01		,				4.6		36,582.96
121	 The result is your annual income for this part of the 	ne form				12	2b. \$	30,302.30
13. Ca	Iculate the median family income that applies to	vou. Follow these ster	ns:					
	,		,					
FIII	in the state in which you live.	NJ						
Fill	in the number of people in your household.	1						
Fill	in the median family income for your state and size	of household.				13	3. \$	68,349.00
To	find a list of applicable median income amounts, go	online using the link s		in the separa			΄ Ψ	<u> </u>
for	this form. This list may also be available at the ban	kruptcy clerk's office.						
14. Ho	w do the lines compare?							
148	 Line 12b is less than or equal to line 13. Of Go to Part 3. 	On the top of page 1, ch	neck box	1, There is	no presun	nption of abu	ıse.	
14	_	of page 1, check box 2	t, The pre	esumption o	f abuse is	determined	by Form 1.	22A-2.
Part 3:	Sign Below							
ait J.	By signing here, I declare under penalty of perjure	v that the information o	n this sta	tomont and	in any att	achmonte ic	true and a	orroct
	by signing here, i declare under penalty of perjur	y that the information o	11 11115 516	itement and	iii aiiy all	301111161115 15	liue anu c	oneci.
	X /s/ Gabriel Horace							
	Gabriel Horace							
D	Signature of Debtor 1 ate October 16, 2019							
	MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file For	m 122A-2.						
	If you checked line 14b, fill out Form 122A-2 and	file it with this form.						

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Debtor 1 Gabriel Horace Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 04/01/2019 to 09/30/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employer: Squan Construction Services L

Constant income of \$3,048.58 per month.*

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Debtor 1 Gabriel Horace Case number (if known)

*Paycheck Details:

Squan Construction Services LLC

Date	Earnings	Overtime	Taxes	Other	Net Check
2019-04-12	840.00	0.00	125.72	213.15	501.13
2019-04-26	1,265.00	0.00	220.61	213.15	831.24
2019-05-10	610.00	0.00	78.09	213.15	318.76
2019-05-24	1,595.00	60.00	314.52	213.15	1,127.33
2019-06-07	1,655.00	217.50	372.01	213.15	1,287.34
2019-06-21	1,620.00	90.00	329.07	213.15	1,167.78
2019-07-05	1,600.00	600.00	489.45	213.15	1,497.40
2019-07-19	1,535.00	0.00	283.74	213.15	1,038.11
2019-08-02	1,546.50	0.00	286.53	213.15	1,046.82
2019-08-16	1,722.50	0.00	332.38	213.15	1,176.97
2019-09-13	1,450.00	0.00	263.15	363.15	823.70
2019-09-27	1,885.00	0.00	340.65	539.43	1,004.92
Totals:	17,324.00	967.50	3,435.92	3,034.08	11,821.50

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
_	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-30674-SLM Doc 1 Filed 10/31/19 Entered 10/31/19 14:15:39 Desc Main Document Page 51 of 56

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of New Jersey

In r	In re Gabriel Horace Case No. Debtor(s) Chapter 7	
	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)	
1.	. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for servic be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:	
	For legal services, I have agreed to accept \$ 1,650.00	
	Prior to the filing of this statement I have received \$ 1,650.00	
	Balance Due	
2.	. \$ 335.00 of the filing fee has been paid.	
3.	. The source of the compensation paid to me was:	
	■ Debtor □ Other (specify):	
4.	. The source of compensation to be paid to me is:	
	■ Debtor □ Other (specify):	
5.	. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associate	es of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of a copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.	my law firm. A
5.	. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:	
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in l	oankruptcy;
	b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;	
	d. [Other provisions as needed] All services, except those identified in paragraph 7 below, that are reasonably contemplated to ac	hiovo tho
	debtor's bankruptcy objectives including but not limited to:	nieve trie
	 (1) File the certificate required from the individual debtor from an approved nonprofit budget and counseling agency for prepetition credit counseling; (2) Preparation and filing of all locally required forms; (3) Representation of the debtor at the § 341 meeting; (4) Amend any list, schedule, statement, and/or other document required to be filed with the petition necessary or appropriate; (5) Motions under § 522(f) to avoid liens on exempt property; 	on as may be
	(6) Motions, such as motions for abandonment, or proceedings to clear title to real property owner. (7) Advise the debtor with respect to any reaffirmation agreement; negotiate, prepare and file reaffirmation.	

- signed by the debtor;
 (8) Removal of garnishments or wage assignments;
- (9) Negotiate, prepare and file reaffirmation agreements;
- (10) Motions under § 722 to redeem exempt personal property from liens;
- (11) Compile and forward to the trustee and the United States trustee any documents and information requested;

agreements if in the best interest of the debtor; and attend all hearings scheduled on any reaffirmation agreement

- (12) Consult with the debtor and if there is a valid defense or explanation, respond to a motion for relief from the automatic stay;
- (13) File the debtor's certification of completion of instructional course concerning financial management (Official Form 423); and
- (14) Disclose any agreement and fee arrangement regarding the potential retention of co-counsel.
- 7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Notwithstanding any agreement to the contrary, representation of the Debtor in any dischargeability action, adversary proceedings, or heavily litigated matters that are not listed in Paragraph 6 above.

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In re	Gabriel Horace	Case No.		
	Debtor(s)			

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

CERTIFICATION						
October 16, 2019 Date	Is/ Scott J. Goldstein Scott J. Goldstein 016472004 Signature of Attorney Deighan Law LLC 280 W. Main Street Denville, NJ 07834 855-466-3920 Fax: 888-751-4932 sjg@uprightlaw.com; notices@uprightlaw.com Name of law firm					

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United States Bankruptcy CourtDistrict of New Jersey

		District of New Jersey		
In re	Gabriel Horace		Case No.	
		Debtor(s)	Chapter	7
	VER	RIFICATION OF CREDITOR N	MATRIX	
Γhe ab	ove-named Debtor hereby verifies	s that the attached list of creditors is true and co	errect to the best	of his/her knowledge.
Date:	October 16, 2019	/s/ Gabriel Horace		
		Gabriel Horace		

Signature of Debtor

ATT Mobility PO BOX 6416 Carol Stream, IL 60197

B&B Collections PO Box 2137 Toms River, NJ 08754-2137

BB&T 200 W 2nd St Winston Salem, NC 27101

Comcast 123 Madison St Oak Park, IL 60302

Commercial Acceptance Company 2300 Gettysburg Road Suite 102 Camp Hill, PA 17011

Cornerstone/American Education Services Attn: Bankruptcy Po Box 2461 Harrisburg, PA 17105

Credence Resource Management 17000 Dallas Parkway Suite 204 Dallas, TX 75248

Credit Acceptance 25505 West 12 Mile Rd Suite 3000 Southfield, MI 48034

Dmytro Lebets c/o Law Office of Yuriy Prakhin PC Nicholas M Serlin, Esq 1883 86th Street, 2nd Floor Brooklyn, NY 11214

E-Z Pass NY Service Center Violation Processing Unit PO Box 15186 Albany, NY 12212-5186 I C System Inc Attn: Bankruptcy Po Box 64378 St Paul, MN 55164

Liberal Finance Servic 1160 Parsippany Bl Parsippany, NJ 07054

Liberal Finance Services 1160 Parsippany Blvd #101 Parsippany, NJ 07054

Liberty Mutual Insurance Co 200 Cottontail Lane Ste A101W Somerset, NJ 08873

Monoc Ambulance Service Corp 260 Church Street Matawan, NJ 07747

NBIMC Dept of Radiology PO Box 8000 Dept 571 Buffalo, NY 14267-0001

Newark Beth Israel Medical Center 201 Lyons Ave Newark, NJ 07102

NJ E-Z Pass 375 McCarter Highway (Route 21) Newark, NJ 07114

NJ Manufacturers Ins Co 301 Sullivan Way Trenton, NJ 08628

Prime Rate Finance 2141 Enterprise Dr Florence, SC 29501 Professional Account Management LLC PO Box 1520 Milwaukee, WI 53201-1520

Randolph Walzer & Associates LLC PO Box 1234 Jackson, NJ 08527

Retrieval Masters Creditors Bureau 4 Westchester Plaza, Suite 110 Elmsford, NY 10523

Southwest Credit Systems 4120 International Parkway Suite 1100 Carrollton, TX 75007

State of NJ Surcharge Violation System PO Box 4850 Trenton, NJ 08650-4850

T-Mobile
Bankruptcy Department
P.O. Box 53410
Bellevue, WA 98015

Wilbur & Associates, P.C. 210 Landmark Dr. Normal, IL 61761-2194